BEST AVAILABLE COPY

FFE CALCID ACTOR CLAIM							ERIAL NO.			FILING DATE			
FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						<u> </u>	10/573419						
	(FOR U	SE WITH	FORM	PTO-875			CANT(S)						
		ATO	(PED)			CLAIMS	·			•	•		
	AS FILED	AS FILED AFTER 1 AMENDMENT IND. DEP. IND. DEP.		AFTER 2 ** AMENDMENT IND. DEP.			AST	AS FILED		AFTER		AFTER	
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	San Adda Market		<u> </u>		NEW YORK	CLAIMS							